

Welcome to The Tennessee Plan

The Medicare Supplement Plan for Tennessee Government Retirees



When you retire, you are faced with some important personal decisions. That is why the State of Tennessee and POMCO are working together to make one of those decisions (Medicare supplemental healthcare) easier for you.

As a retiree, you may be eligible for *The Tennessee Plan*. This plan is designed specifically for retired state employees, teachers and local government employees and their eligible spouses and dependents.

The Tennessee Plan Can Help Fill the Medicare Coverage Gap

If you have Medicare coverage, you likely need The Tennessee Plan to help cover some of the expenses that Medicare does not. The Tennessee Plan helps fill most of the coverage gaps that Medicare creates.

If you are eligible, you can enroll in *The* Tennessee Plan coverage, commonly known as Medigap Coverage. The Tennessee Plan is a standard Medicare supplemental policy designed to fill in the coverage gaps in your Medicare Part A & B coverage.

What Kind of Gaps Does Medicare Part A & B Have?

In 2007, some of the charges Medicare requires you to pay include the following:

• A \$992 deductible out of your own pocket each time you are hospitalized.

- Then \$248 a day for the 61st to the 90th day in the hospital and \$496 a day thereafter up to a 60 day lifetime reserve maximum.
- Plus a \$131 deductible for approved doctors' bills and outpatient expenses and then you must pay an additional 20% of the Medicare approved charges after that.
- You may be responsible for any amount over the Medicare approved charges from providers who do not accept Medicare assignment.

Even with Medicare coverage, your outof-pocket expenses can add up fast and cause financial difficulty. Coverage under The Tennessee Plan can help fill some of these gaps.

There are 10 standard approved (by federal law) Medicare supplemental policies that can be offered. The Tennessee Plan offers benefits comparable to the Medicare Supplemental Standard Plan D.

Who is Eligible to Join?

Any retired State of Tennessee employee, local government employee, teacher or dependent who is eligible for Medicare Part A may apply for coverage under this Plan. If you qualify and enroll for coverage within 60 days of your initial eligibility, you cannot be denied coverage because of your age or health.

Who Administers The Tennessee Plan?

The Tennessee Plan features Medicare supplemental coverage sponsored by the State of Tennessee with claims administered by POMCO. The Tennessee *Plan* offers you quality coverage at lower group premium rates. Since the monthly premiums are not based on age, they will not increase just because you get older. Premium rates may increase due to increasing costs, which would happen with any plan. Best of all, if you have more than 15 years of service as a State of Tennessee employee or teacher, the State of Tennessee will pay part of your cost for your Tennessee Plan coverage.

Less Paperwork - Because Providers File Claims

With The Tennessee Plan, you don't need to worry about paperwork! Most claims are filed for you by your doctors and hospitals if they have your Medicare and The Tennessee Plan member identification numbers. Claims are then sent directly to POMCO after Medicare has completed their part. You will even be able to look up the status of your claims on a secure internet site at

www.TheTennesseePlan.com.

This works out well for everyone. The providers are paid quickly and you avoid all the paperwork.

What Does the Tennessee Plan Cover for 2007?

Benefits at a Glance

MEDICARE GAPS FOR 2007 What you owe after **Medicare pays**

THE **TENNESSEE PLAN Benefits**

Covered

Covered

Covered

Not Covered

Not Covered

Covered

At 80%

Covered

BASIC BENEFITS \$248/day for 61-90 days in hospital

- \$496/day for 60 lifetime
- reserve hospital days • 20% patient's share of approved medical expense
- First three pints of blood

SKILLED NURSING COINSURANCE

• \$124/day for 21st-100th day

PART A DEDUCTIBLE

• \$992/hospital admission

PART B DEDUCTIBLE

• \$131/calendar year for medical expenses

PART B EXCESS

 Medical expense over approved amount

FOREIGN TRAVEL EMERGENCY

 Emergency care beginning during first 60 days of trip outside USA (after \$250 deductible, benefits limited to \$50,000/lifetime)

AT HOME RECOVERY

• Up to \$40/visit (limited to 7 visits/week and \$1,600/ calendar year)

PREVENTIVE CARE

 Annual physical exam and certain preventive tests up to \$120/year

PRESCRIPTION DRUGS

 Outpatient prescription drugs covered through Medicare Part D

Not Covered

Not Covered

What is Not Covered by The Tennessee Plan?

In addition to the chart above, The Tennessee Plan does not provide benefits for:

- Services and supplies not covered by Medicare, except those specifically included under the plan, or
- Any expense that is paid by Medicare.

Can I Choose My Doctors and Hospitals?

This plan gives you complete freedom in choosing doctors and hospitals and does not make you choose from a specific list of providers in order to receive benefits. For maximum financial protection you should always choose a provider who accepts Medicare assignment.

Read Your Plan Booklet Carefully

When you are accepted for coverage under The Tennessee Plan, you will receive a Plan Booklet. Please read this booklet carefully to understand all the rights and responsibilities under The Tennessee Plan. While The Tennessee *Plan* pays for most of the gaps in your health care left by Medicare, it may not fully cover all of your medical costs. It is your responsibility to review all plan limitations carefully to make sure that The Tennessee Plan meets your Medicare supplement needs.

This benefit outline does not provide all the details of Medicare coverage. For details of your Medicare coverage, contact your local Social Security office for assistance.

How Much are the Premiums?

One of the main advantages of The *Tennessee Plan* is the **lower group** premium rates you pay for this coverage. If you are a retired state employee or school teacher with 15 years or more of service, the State will even pay part of your premium cost for you. These employee-supported premium rates do not apply to your dependents.

The maximum monthly premium rate you will pay in 2007 is \$105 until March, when the maximum premium drops to \$90. Just check the table to the right to see what your monthly premium will be.

If you receive a State of Tennessee TCRS benefit check, your portion of the premium cost for the program will be deducted automatically from your monthly benefit payment. If your TCRS benefit is not sufficient to cover the cost for the coverage, or if you already have an insurance deduction, you will be billed directly. You can also choose automatic payment from your bank account.

It's Easy to Apply

First, read this material carefully and study the charts that explain The Tennessee Plan benefits. Applying for coverage is easy, just complete the enclosed application form and mail it to the Tennessee Consolidated Retirement System (TCRS).

Please Check Your Application

Be sure to review your application before you mail it to be certain that all information has been properly entered.

Any Questions?

Call the Tennessee Consolidated Retirement System (TCRS) insurance section at 1-877-681-0155, Monday through Friday, 8 a.m. to 4:30 p.m. CST, if you have any question concerning your eligibility status, or any premiums for this program.

If you have questions about your Tennessee Plan benefits you may contact the Claims Administrator, POMCO, toll free at 1-888-477-9307, Monday through Friday, 8 a.m. to 6 p.m. CST (9 a.m. to 7 p.m. EST).

THE TENNESSEE PLAN MONTHLY PREMIUM AMOUNTS

Plan Year 2007	Thru February	Effective March 2007
30 + Years of Service	\$55.00	\$40.00
20-29 Years	\$67.50	\$52.50
15-19 Years	\$80.00	\$65.00
Less than 15 Years	\$105.00	\$90.00
Dependent (Spouse)	\$105.00	\$90.00
Local Education Support Staff	\$105.00	\$90.00
Local Government	\$105.00	\$90.00